BEST AVAILABLE COPY													
PATENT APPLICATION FEE DETERMINATION RECOR								Application or Docket Number 09736654					
			0 /										
CLAIMS AS FILED - PART I (Column 1) (Column 2)							_	MALL EI		OR	OTHER SMALL		
TOTAL CLAIMS			20					RATE	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMB	UMBER EXTRA		BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			20 minus 20=		•			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			2 minus 3 =					X40=		OR	X80=		
WOT,	TIPLE DEPEN	IDENT CLAIM P	RESENT					+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2						L	TOTAL		OR	TOTAL			
CLAIMS AS AMENDED - PART II (Cotumn 1) (Cotumn 2) (Cotumn 3)								OTHER THAN SMALL ENTITY OR SMALL ENTITY					
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	lote)	. 26	Minus	- 2	0	- 0		X\$ 9=		OR	X\$18=		
AME.	ndependent	Minus					X40=		OR	X80=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=		OR	+270=		
93005 (Column 1) (Column 2) (Column 3)							TOTAL DOIT, FEE		OR	TOTAL ADDIT, FEE			
9	1,750.03	(Column 1)		(Colur	nn 2)	(Column 3)	_	DOTT. FEE		• .	•		
MENDMENT B		CLAIMS REMAINING AFTER AMENOMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	lotal .	. 23	Minus	* &	9	=		X\$ 9=		OR	X\$18=		
	ndependent	• 4	Minus	 /	/	•		X40=		OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+135=	-\	OR	+270=		
	. 1						Ļ	TOTAL		ا م	TOYAL		
3-3-06 (Column 1) (Column 2) (Column 3)								ADDIT, FEE					
UDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	EST BER CUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	lotal .	. 19_	Minus	•2	61	\$.		X\$ 9=			X\$18=	_	

FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

Minus

OR ADDIT. FEE

Independent

OR

OR

X40=

+1354

XEC

+270=

TOTAL

[&]quot;If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Fotal or Independent) is the highest number found in the appropriate box in column 1.